FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BEN	EFICIAL OWNERSHIP
-----------------------------	-------------------

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  GORMAN KEVIN CHARLES						2. Issuer Name <b>and</b> Ticker or Trading Symbol NEUROCRINE BIOSCIENCES INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
GORMAN KEVIN CHARLES						NBIX ]									X	Direc	ctor 10%		10% C	wner	
(Last)	Last) (First) (Middle)					-										Office	er (give title v)		Other (specify below)		
12780 EL CAMINO REAL						3. Date of Earliest Transaction (Month/Day/Year) 01/19/2016											President and CEO				
(Street) SAN DIE	Street) SAN DIEGO CA 92130				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(City)	(St	ate) (	Zip)												Form filed by More than C Person				One Rep	orting	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Tran Date (Month					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and S B O		5. Amount of Securities Beneficially Owned Following Reported		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	() (I	A) or D) Price		Transaction(s)		action(s)			(1130.4)			
Common Stock					01/19/2016				S <sup>(1)</sup>	V	3,750	D \$		\$46.	.7 <sup>(2)</sup> 224,952			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	onversion Date (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year)		Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)			Expiration Date	Title Sha		res							

## **Explanation of Responses:**

1. Sale of 3,750 shares of common stock issued upon vesting of 7,500 restricted stock units on January 19, 2016 to cover payroll and withholding taxes, with the balance of the shares (3,750) maintained by the Reporting Person; the disposition reported in this Form 4 was effected by a broker pursuant to instructions set forth in a Rule 10b5-1 trading plan adopted by the Reporting Person at least 90 days prior to the transaction date in Box 3 above. Additionally, Issuer policy restricts the Reporting Person from amending, canceling, suspending or otherwise modifying any 10b5-1 trading plan subsequent to adoption of the plan.

2. Represents a weighted average sales price per share. These shares were sold in multiple transactions at prices ranging from \$45.42 to \$48.86. The Reporting Person has provided to the issuer, and will provide to any security holder of the issuer or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

## Remarks:

/s/ Darin Lippoldt, Attorney-In-Fact 01/21/2016

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.